

Please type or sign (+) inside this box → +

MAR 29 2002

POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	10/006,279
Filing Date	12/04/2001
First Named Inventor	JUAN C. COLBERG
Title	COUPLING PROCESS AND INTERMEDIATES USEFUL FOR PREPARING CEPHALOSPORINS
Group Art Unit	
Examiner Name	
Attorney Docket Number	PC10862A

I hereby appoint:

 Practitioners at Customer Number

23913

OR

 Practitioners named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number→

OR

 Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

## SIGNATURE of Applicant or Assignee of Record

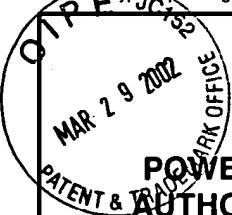
Name **GIOVANNI FOGLIATO**Signature *Giovanni Fogliato*Date **11/03/02**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of **2** forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC

Please type a plus sign (+) inside this box → +


**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	10/006,279
Filing Date	
First Named Inventor	JUAN C. COLBERG
Title	COUPLING PROCESS AND INTERMEDIATES USEFUL FOR PREPARING CEPHALOSPORINS
Group Art Unit	
Examiner Name	
Attorney Docket Number	PC10862A

I hereby appoint:

 Practitioners at Customer Number

23913

**OR** Practitioners named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.**OR** Practitioners at Customer Number**OR** Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record**Name JUAN C. COLBERGSignature Juan C. ColbergDate March 17/2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of 4 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC



MAP 29 2002  
Please type a plus sign (+) inside this box → +

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/006,279
Filing Date	12/04/2001
First Named Inventor	JUAN C. COLBERG
Title	COUPLING PROCESS AND INTERMEDIATES USEFUL FOR PREPARING CEPHALOSPORINS
Group Art Unit	
Examiner Name	
Attorney Docket Number	PC10862A

I hereby appoint:

Practitioners at Customer Number

23913



OR

Practitioners named below:

Name	Registration Number

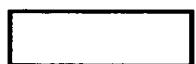
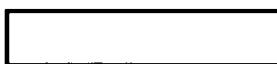
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

Practitioners at Customer Number



OR

Firm or  
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

### SIGNATURE of Applicant or Assignee of Record

Name ALESSANDRO DONADELLI

Signature Alessandro Donadelli

Date 11/3/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 4 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC

MAR 29 2002

Please type a plus sign (+) inside this box → +

PTO/SB/81(02-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCEPOWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	10/006,279
Filing Date	12/04/2001
First Named Inventor	JUAN C. COLBERG
Title	COUPLING PROCESS AND INTERMEDIATES USEFUL FOR PREPARING CEPHALOSPORINS
Group Art Unit	
Examiner Name	
Attorney Docket Number	PC10862A

I hereby appoint:

 Practitioners at Customer Number

23913

OR

 Practitioners named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number[Redacted]→ [Redacted]

OR

 Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

## SIGNATURE of Applicant or Assignee of Record

Name MAURIZIO ZENONI

Signature *Maurizio Zenoni*

Date 11/3/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

 \*Total of 4 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- The attached application, or
- Application No. 10/006,279, filed on 12/04/2001
- as amended on \_\_\_\_\_ if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**Full Name of Inventor(s)**

Inventor 1 MAURIZIO ZENONI

Signature

Citizen of IT

Inventor 2 GIOVANNI FOGLIATO

Signature

Citizen of IT

Inventor 3 ALESSANDRO DONADELLI

Signature

Citizen of IT

 Additional inventors are being named on

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

#5

**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- O P T E J C Y S  
MAR 29 2002  
PATENT & TRADEMARK OFFICE
- The attached application, or
  - Application No. 10/006,279, filed on 12/04/2001
  - as amended on \_\_\_\_\_ if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;

I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**Full Name of Inventor(s)**

Inventor 1 JUAN C. COLBERG

Signature

US

Citizen of

Additional inventors are being named on

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.